

1.) CORPORATION NAME:

Appalachian Power Company

DUE DATE: **3/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

SCC ID NO: **00293480**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	30,000,000
CUMP	8,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 RIVERSIDE PLAZA

CITY/ST/ZIP: COLUMBUS, OH 43215-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	CHARLES R PATTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	P/COO		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	NICHOLAS K AKINS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	ROBERT POWERS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	BARBARA D RADOUS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	BRIAN X TIERNEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		

NAME:	DENNIS E WELCH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	MARK E DEMPSEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	MICHAEL HEYECK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JEFFERY D LAFLEUR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	TIMOTHY K LIGHT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	MARK C MCCULLOUGH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	CHRIS POTTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	MARK A PYLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	PHILIP A WRIGHT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	THOMAS G BERKEMEYER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		

NAME:	JEFFREY D CROSS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	ANNE M VOGEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	RENEE V HAWKINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JOSEPH M BUONAIUTO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	ANDREW B REIS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST CONTROLLER		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JULIE WILLIAMS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST CONTROLLER		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	DAVID M. FEINBERG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	NICHOLAS K. AKINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	SCOTT N SMITH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	155 NATIONWIDE BLVD.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	LISA M. BARTON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 RIVERSIDE PLAZA		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

/s/ MARK A PYLE	MARK A PYLE, VICE PRESIDENT	2/23/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		